

PUBLIC HEALTH DEPARTMENT[641]

Notice of Intended Action

Twenty-five interested persons, a governmental subdivision, an agency or association of 25 or more persons may demand an oral presentation hereon as provided in Iowa Code section 17A.4(1)“b.”

Notice is also given to the public that the Administrative Rules Review Committee may, on its own motion or on written request by any individual or group, review this proposed action under section 17A.8(6) at a regular or special meeting where the public or interested persons may be heard.

Pursuant to the authority of Iowa Code section 139A.3, the Department of Public Health hereby gives Notice of Intended Action to amend Chapter 1, “Reportable Diseases, Poisonings and Conditions, and Quarantine and Isolation,” Iowa Administrative Code.

The proposed amendment provides an exemption for health care providers and hospitals from reporting communicable and infectious disease laboratory results if the health care provider or hospital ensures that the laboratory performing the analysis provides a report containing the required information to the Department. Health care providers and hospitals that do not perform their own laboratory tests which yield reportable disease results will benefit from this amendment in that the providers and hospitals will not need to incur significant costs associated with electronic laboratory reporting (ELR) to the Department for the purpose of sending a duplicate report that the Department has already received. Also, Meaningful Use requirements call for eligible hospitals and critical access hospitals to accomplish information system-to-system communication. There is no consideration of one important reporting facet of hospital business practice: whether or not a hospital actually performs the laboratory test or sends it out to another laboratory facility. If a hospital performs the laboratory work, the hospital should comply with the Meaningful Use objective and report laboratory results. However, if the hospital does not perform the work and the performing laboratory reports results back to both the facility, which the laboratory would do naturally, and to the Department, which the laboratory should do to comply with existing legal requirements, then the additional effort and cost of implementing ELR from the requesting (but not performing) hospital so that it is capable of reporting a duplicate result to the Department provides zero benefit.

Any interested person may make written comments or suggestions on the proposed amendment on or before April 23, 2013. Such written comments should be directed to John Satre, Iowa Disease Surveillance System Coordinator, Center for Acute Disease Epidemiology, Department of Public Health, Lucas State Office Building, 321 East 12th Street, Des Moines, Iowa 50319; fax (515)281-5698. E-mail may be sent to john.satre@idph.iowa.gov.

After analysis and review of this rule making, the impact on jobs is anticipated to be minimal.

This amendment is intended to implement Iowa Code section 139A.3.

The following amendment is proposed.

Amend paragraph **1.4(1)“a”** as follows:

a. Health care providers, hospitals, clinical laboratories, and other health care facilities are required to report cases of reportable communicable and infectious diseases. Health care providers and hospitals are exempted from reporting communicable and infectious disease laboratory results if the health care provider or hospital ensures that the laboratory performing the analysis provides a report containing the required information to the department.